CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **Name** SHARON LASCOLA CAMPAIGN

(2) **Address (number and street)** 2168 WINGATE BEND

City, State, Zip Code WELLINGTON, FL 33414

☐ **Check here if address has changed**

(3) ID Number: _____

(4) **Check appropriate box(es):**
☑ Candidate Office Sought: SEAT 2 WELLINGTON VILLAGE COUNCIL
☐ Political Committee (PC)
☐ Electioneering Communications Org. (ECO)
☐ Party Executive Committee (PTY)
☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ **Check here if PC or ECO has disbanded**
☐ **Check here if PTY has disbanded**
☐ **Check here if no other IE or EC reports will be filed**

(5) Report Identifiers

Cover Period: From 02 / 08 / 14 To 02 / 21 / 14 Report Type: 2014G2

☐ Original ☑ Amendment ☐ Special Election Report

(6) **Contributions This Report**		(7) **Expenditures This Report**	
Cash & Checks	$, 6,720.00	Monetary Expenditures	$, 1,709.50
Loans	$, , .	Transfers to Office Account	$, , .
Total Monetary	$, 6,720.00	Total Monetary	$, 1,709.50
In-Kind	$, , .	(8) **Other Distributions** $, , 935.33	

(9) **TOTAL Monetary Contributions To Date**	(10) **TOTAL Monetary Expenditures To Date**
$, 8,985.00	$, 2,644.83

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) BARBARA MAGOVSKY
☐ Individual (only for IE or electioneering comm.) ☑ Treasurer ☐ Deputy Treasurer

X _Barbara Magovsky_
Signature

(Type name) SHARON LASCOLA
☑ Candidate ☐ Chairperson (only for PC and PTY)

X _Sharon Lascola_
Signature

SEE REVERSE FOR INSTRUCTIONS

DS-DE 12 (Rev. 11/13)